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CONFIRMATION NO. 4159

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SERIAL NUMBER 10/663,896	FILING OR 371(c) DATE 09/16/2003 RULE	CLASS 435	GROUP ART UNIT 1652	ATTORNEY DOCKET NO. PP001524.0103/20366150002
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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 09/464,065 12/15/1999 ABN
 which claims benefit of 60/112,497 12/16/1998

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 01/10/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

65484

TITLE

HUMAN CYCLIN-DEPENDENT KINASE (HPNQALRE)

FILING FEE RECEIVED 1218	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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